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*To ensure access to high-quality,
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health care to Los Angeles County
residents through direct services at
DHS facilities and through
collaboration with community and
university partners.*



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March 1, 2013

TO: Each Supervisor

FROM: Mitchell H. Katz, M.D. *A. Mahajan*
for Director

SUBJECT: **STATUS REPORT ON KEY INDICATORS OF PROGRESS,
HOSPITAL OPERATIONS, AND OTHER ISSUES RELATED
TO THE TRANSITION TO THE NEW LAC+USC MEDICAL
CENTER – PROGRESS REPORT #85**

This is to provide your Board with the monthly report on the status of transitioning to the new LAC+USC Medical Center (LAC+USC). This report is the full monthly operational report with trends to include the month of January 2013.

Census Trending (ADC includes Psychiatric & Newborn Patients)

The Average Daily Census (ADC) for the month of December was 573 out of 676 licensed beds, an estimated 83% utilization rate (85% occupancy). The census for Medical/Surgical units was an estimated 93% utilization rate (95% occupancy) for January 2013.

Emergency Department (ED) Indicators

The attachment demonstrates an increase in the key indicator Average Length of Stay (ALOS), Median ED Boarding, ED Wait Time, Left Without Being Seen (LWBS), and Dangerously Overcrowding for this period. There was also an increase in the number of patients transferred out. The Dangerously Overcrowding Level Comparison for this period was 33%, compared to 1% in December 2012. However, this increase is similar to Dangerously Overcrowding levels observed in January 2012 at 26.3% and January 2011 at 44%. The drastic change in the key indicators from November and December 2012 to January 2013 can potentially be attributed to the increased presentation of influenza like illness towards the end of the month.

If you have any questions or need additional information please contact me or Christina Ghaly, LAC+USC Interim Chief Executive Officer, at (323) 409-2800.

CG:ab

Attachment

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors

LAC+USC Medical Center
Operational Monitoring Report
Reporting Period – Jan 2013

Indicator	Definition	Data	Comments																																																																
Indicator #1 – Trends in Average Daily Census and Hospital Operations Metrics																																																																			
1a. Average Daily Census (ADC)	<p>ADC: A measure of the total number of inpatients occupying licensed beds on a daily basis reported as the arithmetic mean.</p> <p>Calculation: Total number of admitted inpatients at 12:00 AM midnight daily, summed over the month and divided by the total number of days in the month.</p> <p>Source of Data: Affinity</p>	<p style="text-align: center;">ADC</p> <table><tr><th>Month</th><th>ADC</th></tr><tr><td>Jul '10</td><td>596</td></tr><tr><td>Aug '10</td><td>604</td></tr><tr><td>Sep '10</td><td>598</td></tr><tr><td>Oct '10</td><td>596</td></tr><tr><td>Nov '10</td><td>581</td></tr><tr><td>Dec '10</td><td>581</td></tr><tr><td>Jan '11</td><td>593</td></tr><tr><td>Feb '11</td><td>600</td></tr><tr><td>Mar '11</td><td>586</td></tr><tr><td>Apr '11</td><td>577</td></tr><tr><td>May '11</td><td>575</td></tr><tr><td>Jun '11</td><td>572</td></tr><tr><td>Jul '11</td><td>569</td></tr><tr><td>Aug '11</td><td>579</td></tr><tr><td>Sep '11</td><td>561</td></tr><tr><td>Oct '11</td><td>575</td></tr><tr><td>Nov '11</td><td>587</td></tr><tr><td>Dec '11</td><td>580</td></tr><tr><td>Jan '12</td><td>582</td></tr><tr><td>Feb '12</td><td>580</td></tr><tr><td>Mar '12</td><td>572</td></tr><tr><td>Apr '12</td><td>561</td></tr><tr><td>May '12</td><td>558</td></tr><tr><td>Jun '12</td><td>547</td></tr><tr><td>Jul '12</td><td>573</td></tr><tr><td>Aug '12</td><td>576</td></tr><tr><td>Sep '12</td><td>585</td></tr><tr><td>Oct '12</td><td>572</td></tr><tr><td>Nov '12</td><td>534</td></tr><tr><td>Dec '12</td><td>537</td></tr><tr><td>Jan '13</td><td>573</td></tr></table> <p>Note: Average Daily Census number reported includes Medical Center + Psych + Newborns Census.</p>	Month	ADC	Jul '10	596	Aug '10	604	Sep '10	598	Oct '10	596	Nov '10	581	Dec '10	581	Jan '11	593	Feb '11	600	Mar '11	586	Apr '11	577	May '11	575	Jun '11	572	Jul '11	569	Aug '11	579	Sep '11	561	Oct '11	575	Nov '11	587	Dec '11	580	Jan '12	582	Feb '12	580	Mar '12	572	Apr '12	561	May '12	558	Jun '12	547	Jul '12	573	Aug '12	576	Sep '12	585	Oct '12	572	Nov '12	534	Dec '12	537	Jan '13	573	ADC provided as background information.
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LAC+USC Medical Center
Operational Monitoring Report
Reporting Period Jan 2013

Indicator #1 – Trends in Average Daily Census and Hospital Operations Metrics

**1b.
Occupancy
Rate
LAC+USC
Medical
Center**

Definition:

A measure of the usage of the licensed beds during the reporting period that is derived by dividing the patient days in the reporting period by the licensed bed days in the reporting period.

Calculation:

The total number of admitted inpatients at 12:00 AM midnight, including women in labor, may include normal newborns and psychiatric inpatients divided by licensed or budgeted beds.

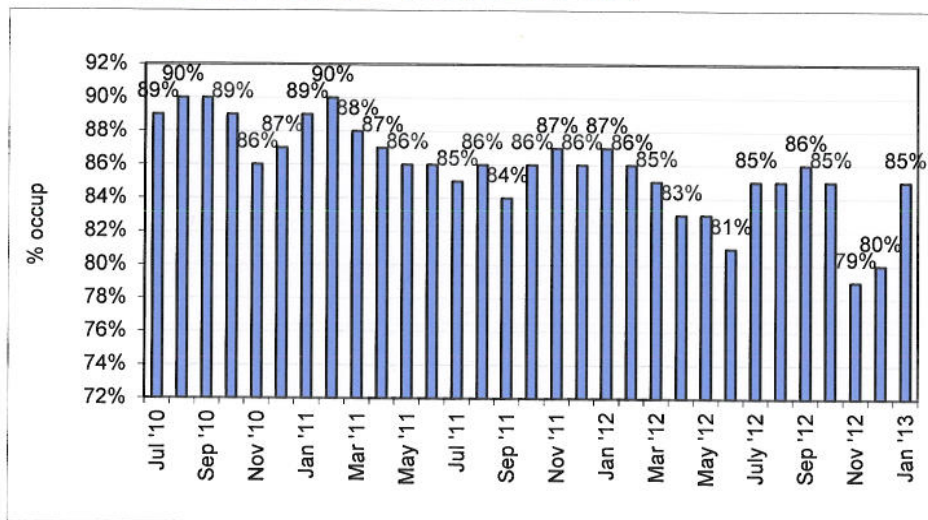
Source of Data:

Affinity

Target:

95%

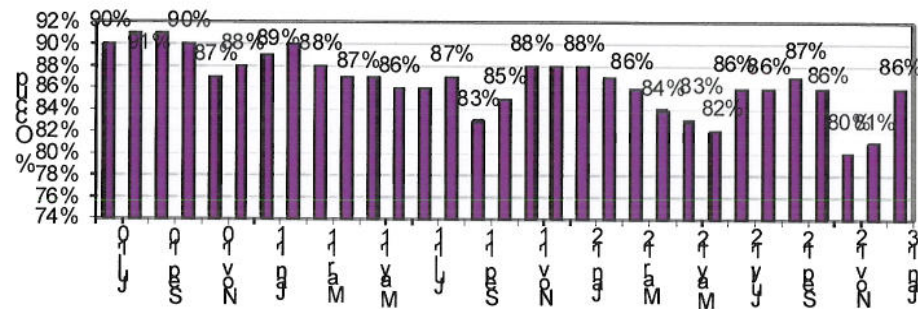
1. Medical Center Licensed Occupancy Rate (excluding Newborns) =
Med Center Census – Newborns / 600



For comparison, occupancy rates reported in the old facility were reported including newborns and were based on budgeted beds.

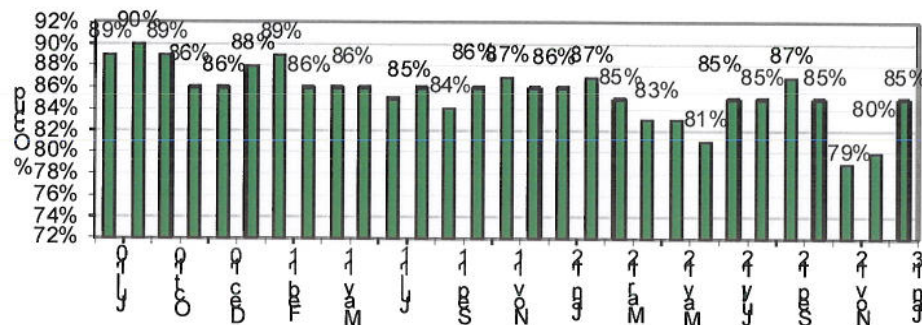
LAC+USC Medical Center
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Medical Center Licensed Occupancy Rate (including Newborns) Med
Center Census / 600



Medical Center Budgeted Occupancy

Med Center Census + Newborns + Psych Hosp Census / 676



Medical Center = New Facility + Psychiatric Hospital

LAC+USC Medical Center
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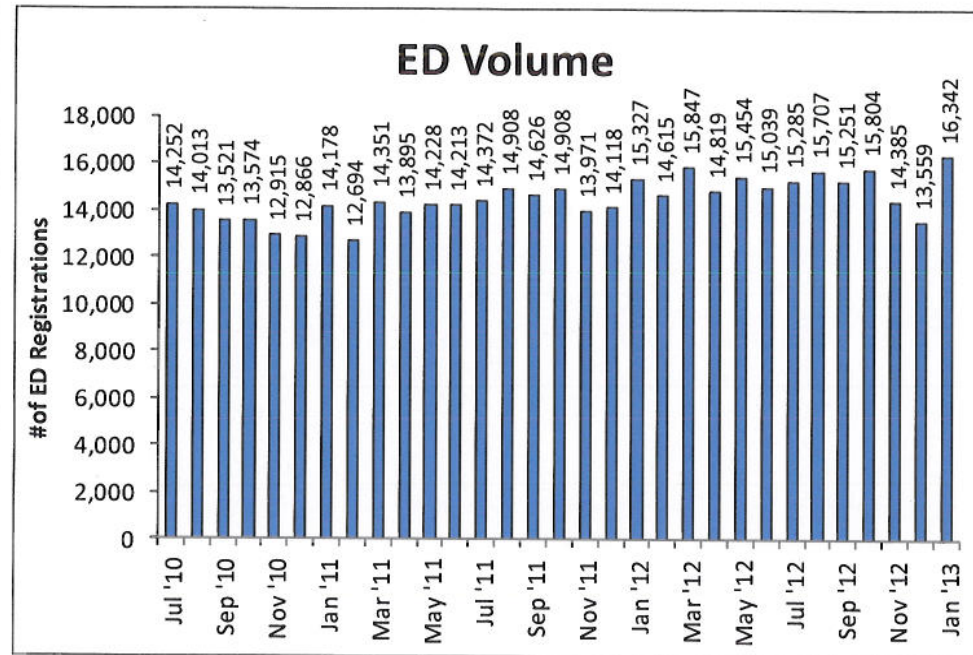
Indicator #2 - Emergency Department Metrics

2a.
ED
Volume

ED Volume:

Measured by total number of Emergency Department patient registrations.

Source of Data:
Affinity



The annual total ED Volume for FY 10-11 was 164,700 which increased to 178,004 in FY 11-12. If the current increase in ED monthly volume is maintained, the annual total ED volume for FY 12-13 will surpass the FY 11-12 amount.

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2b.
Median
Emergency
Department
Boarding
Time
(EDBT)

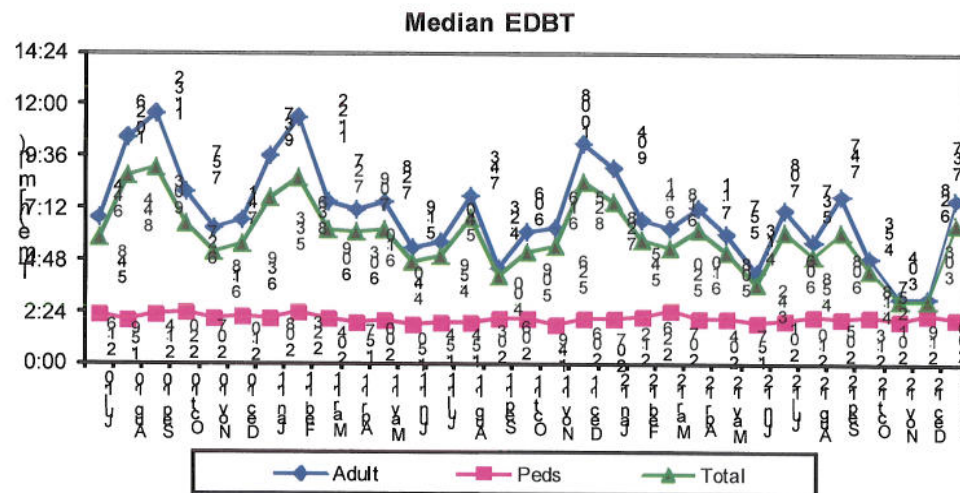
***Harris**
Rodde
Indicator

Boarding Time:
 Time from MD Admit
 time (effective date
 and time of pre-admit)
 to time the patient
 actually leaves the
 ED en route to
 assigned bed
 (effective date and
 time of the ED
 disposition).

Calculation:
 The middle value in
 the set of individual
 boarding times for the
 month arranged in
 increasing order. If
 there is an even
 number of values,
 then the median is the
 average of the middle
 two values.

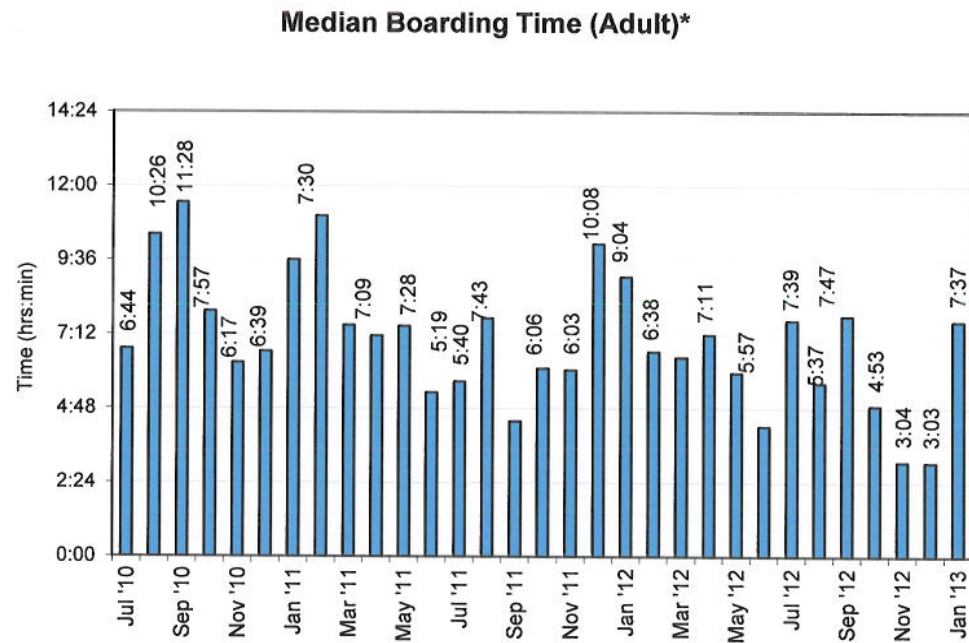
Source of Data:
 Affinity

Target:
 Less than 7 hours.



Jan '13 data is Preliminary data

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Jan '13 data is Preliminary data

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Indicator #2 - Emergency Department Metrics

2c.
ED Wait Time

ED Wait Time:
 Measured from time patient is triaged to time patient is either admitted or discharged reported as an arithmetic mean.

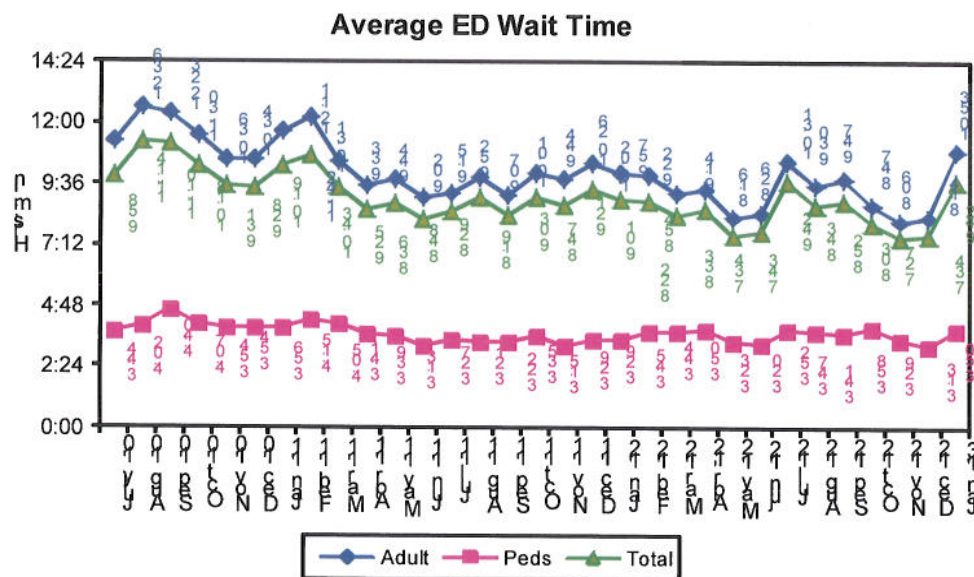
Definition:

Sum of all wait time values during the monthly reporting period divided by the total number of values.

Source of Data:
 Affinity

Target:

No target value.
 Lower numbers are better.



Adult Wait Time : *Excludes Psych, Pediatric, Observation Unit, and Jail patients

Total ED Wait time: *Excludes Psych, Observation Unit, and Jail

Jan '13 data is Preliminary data

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Indicator #2 - Emergency Department Metrics

2d.
Left Without Being Seen (LWBS)

***Harris Rodde Indicator**

LWBS:

The total number of patients who left the ED without being seen by a physician reported as a percentage of all ED visits.

Calculation:

The total number of patients who left the ED without being seen divided by the total number of ED patient visits on a monthly basis.

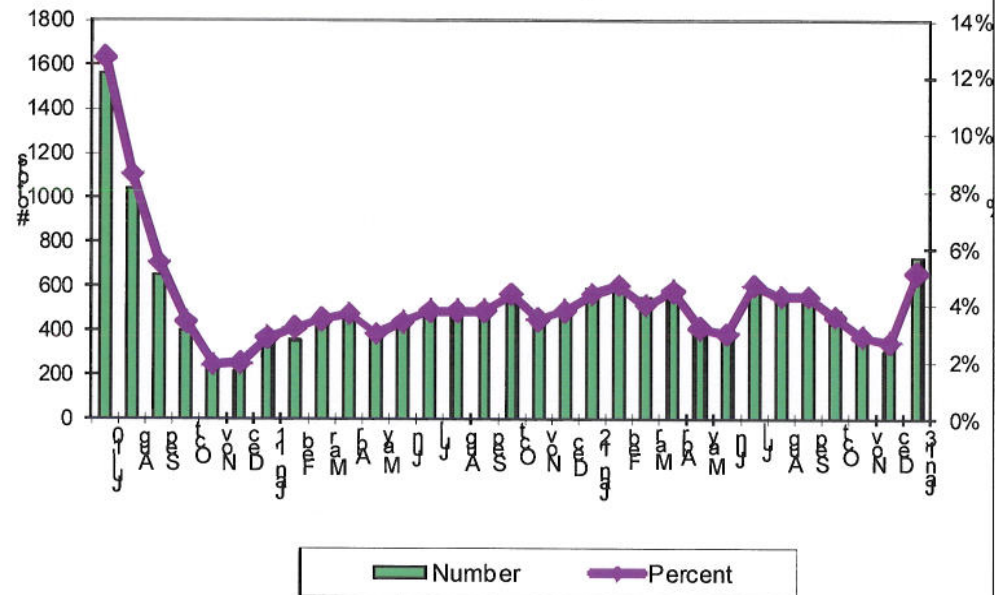
Source of Data:

Affinity

Target:

No target value.
Lower numbers are better.

Left Without Being Seen



Jan '13 data is Preliminary data

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Indicator #2 - Emergency Department Metrics

**2e.
ED
Diversion**

ED Diversion:

A percentage measure of the time the ED diverts ambulance traffic away from the ED, reported as a function of the reason for diversion on a monthly basis.

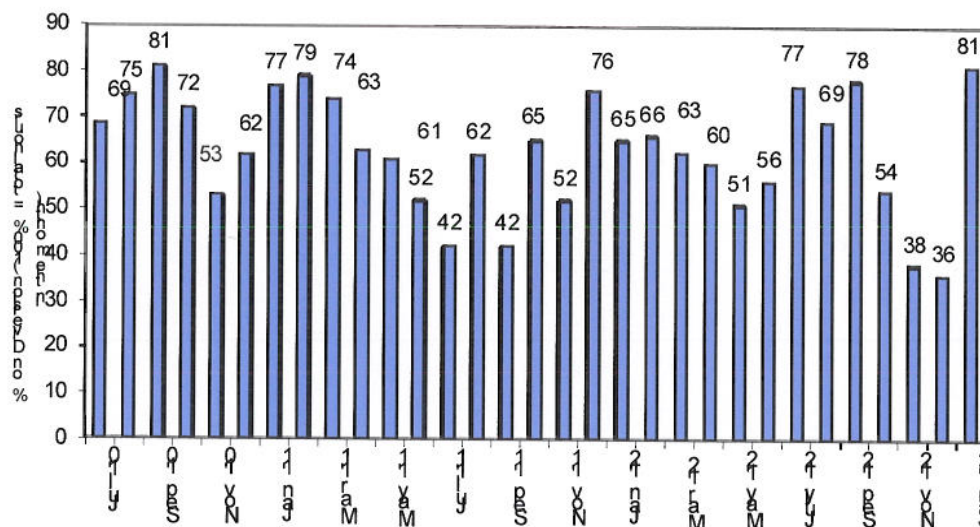
Calculation:

The total number of hours of ED diversion for a specific reason divided by the total number of available hours in a month.

Source of Data:

ReddiNet

Diversion of ALS Units due to ED Saturation

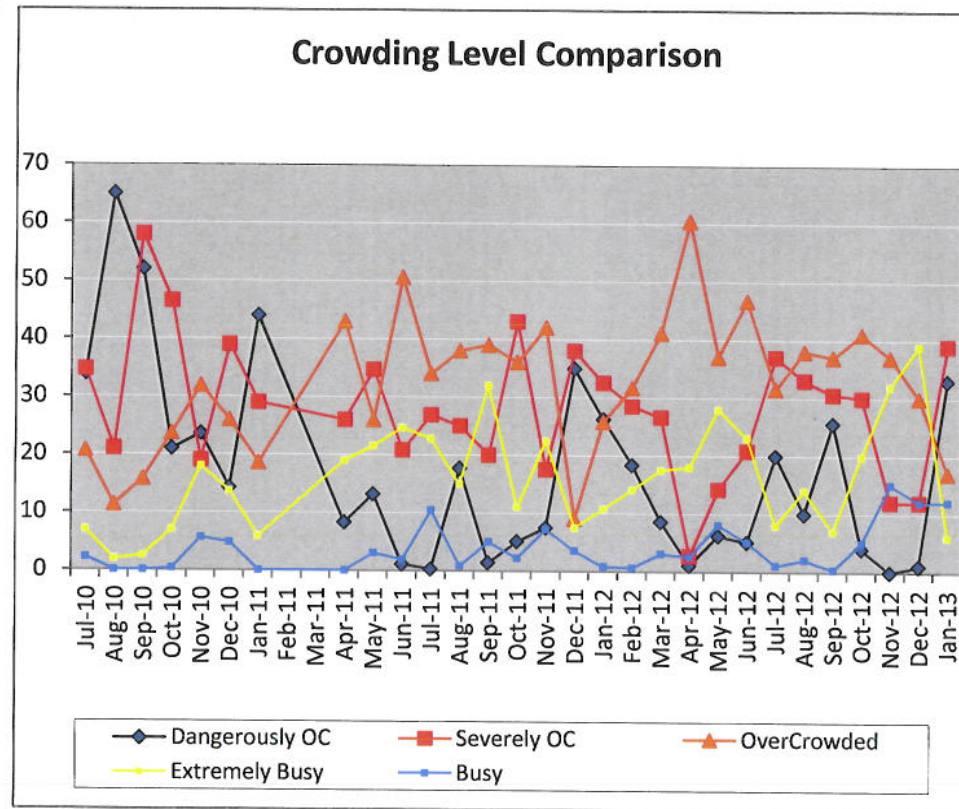


Key points:

-- Diversion is for paramedic runs only; Basic Life Support ambulances still arrive.
-- When diversion is requested but all hospitals in the area are on diversion, patients go to the closest hospital. Therefore, ambulances often arrive while "on diversion".

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2f.
Surge
Report



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Indicator #3 – Trends for Patient Diversions and Transfers & #4 – Transfers to Rancho Los Amigos Metrics

**3. & 4.
Rancho
Los
Amigos
Hospital
(RLAH)
Transfers**

Transfers:
The volume of patients transferred to RLAH for acute hospitalization from the Emergency Department and from Inpatient Units.

Data Source:
Manual record keeping.

Cancelled category includes patients whose condition changed leading to higher level of care or discharge home.

Month of Jan '13

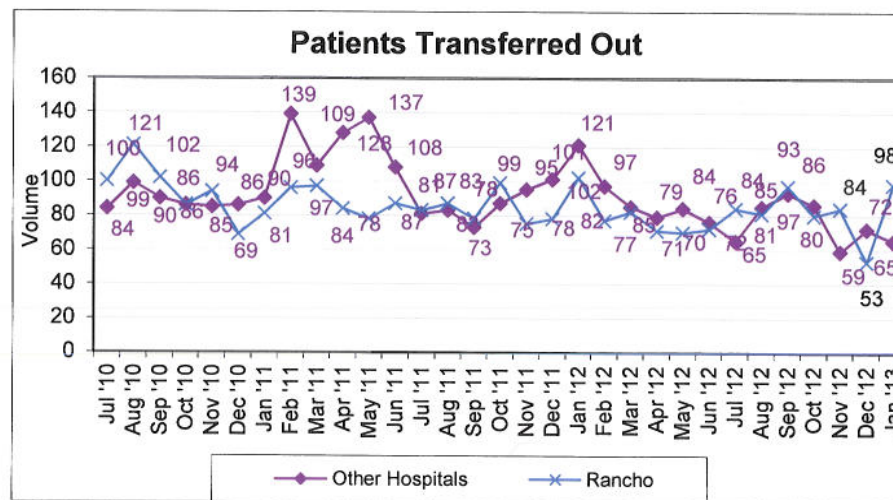
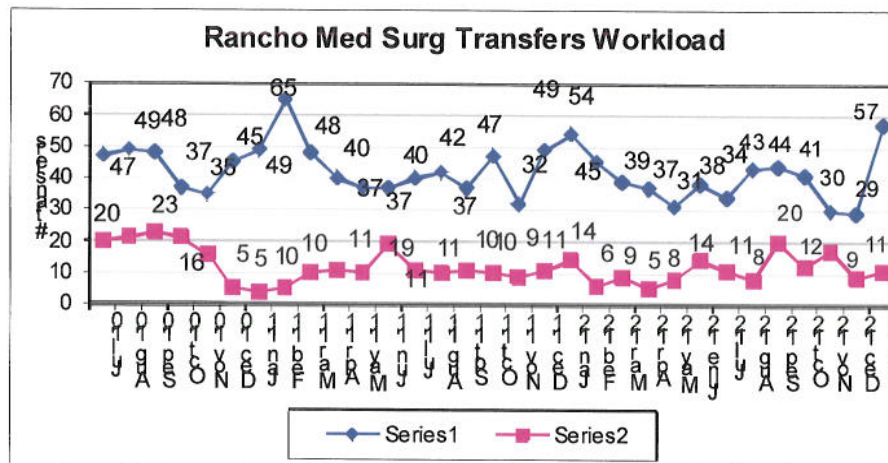
Referrals from ER:

	Med/Surg	Acute Stroke	Total
# Met transfer criteria	58	NA	-
# Referred to RLAH	58	24	82
# Transfers	57	24	81
# Denied	0	NA	-
# Cancelled	1*	NA	-
# Patients refused*		NA	-

Referrals from Inpatients:

	Med/Surg	Acute Stroke	Total
# Met transfer criteria	14	NA	-
# Referred to RLAH	14	6	20
# Transfers	11	6	17
# Denied	2	NA	-
# Cancelled	1*	NA	-
# Patients refused*	0	NA	-
Other /Pending	0	NA	-

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Other hospitals = Silver Lake (0), Managed Care Repatriation (65)

Data was revised to reflect total # of patients (including stroke patients) referred to Rancho

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Indicator #5 – Harris Rodde Indicators

5.

Average Length of Stay (ALOS)

***Harris Rodde Indicator**

LOS:

The difference between discharge date and the admission date or 1 if the 2 dates are the same.

Total LOS:

Calculation:

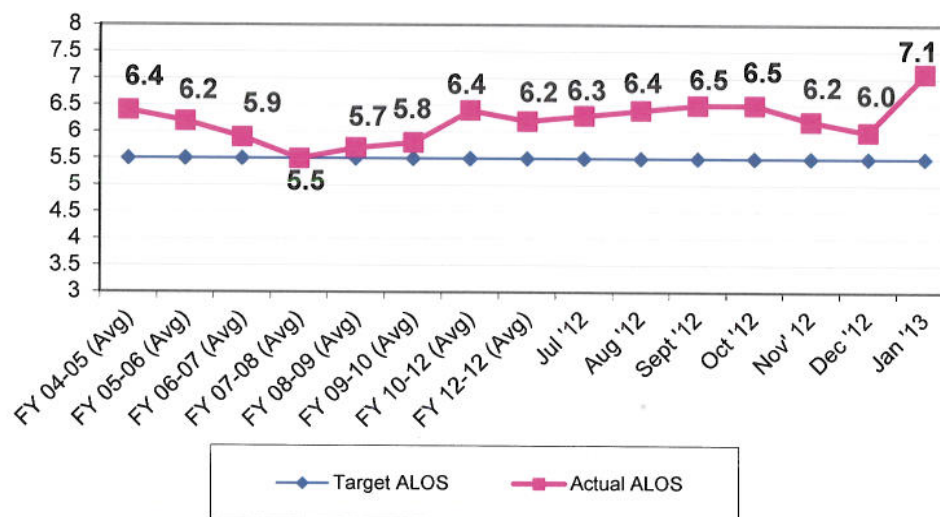
ALOS is the arithmetic mean calculated by dividing the Total LOS by the Total # of discharges in the monthly reporting period, rounded off to one decimal place.

Source of Data:

Affinity

Target: <5.5 days

Average length of Stay



***Medical Center (New Facility + Psychiatric Hospital) ALOS - Preliminary data pending Auditor-Controller validation**

Overall trend in ALOS for the 2-year period prior to the move reduced to a low range of 4.7 – 5.5 days in 2008. Immediately prior to the move, the ALOS increased as the lower acuity patients were transferred to other facilities. This trend may continue depending on number of transfers.

*As of July 2010 with the consolidation of Ingleside and Hawkins, all psychiatric services are now included. There were 9 patients discharged in January, 2013 with LOS > 100. Without the effect of these 9, ALOS would have been 6.5 rather than 7.1.

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Indicator #6 – Pediatric Metrics

6. Pediatric Bed Census and Occupancy (%) Pediatric ICU (PICU) Neonatal ICU (NICU) Pediatric Unit Adolescent Unit	Census: The total number admitted pediatric inpatients at 12:00 AM midnight of a designated pediatric ward. Occupancy: The total number of admitted pediatric inpatients divided by the total number of licensed beds on that unit and reported as percentage. Source of Data: Affinity	Date	NICU (40 Beds)	Peds Ward (25 Beds)	PICU (10 Beds)	Med/Surg Adolescent (20 Beds)
		Jul-10	60%	68%	80%	85%
		Aug-10	62%	68%	60%	85%
		Sep-10	72.5%	60%	60%	80%
		Nov-10	67.5%	48%	50%	70%
		Dec-10	62%	60%	50%	65%
		Feb-11	57%	68%	80%	80%
		Apr-11	55%	64%	50%	75%
		May-11	57%	56%	50%	80%
		Jul-11	58%	44%	50%	70%
		Aug-11	58%	44%	40%	75%
		Sep-11	58%	40%	50%	75%
		Nov-11	62%	60%	70%	75%
		Dec-11	65%	40%	60%	70%
		Jan-12	60%	52%	60%	75%
		Feb-12	55%	56%	60%	70%
		Mar-12	55%	64%	50%	75%
		Apr-12	53%	48%	50%	65%
		May-12	42%	40%	50%	70%
		Jun-12	37.5%	44%	50%	60%
		Jul-12	45%	48%	60%	80%
		Aug-12	57%	48%	50%	75%
		Sep-12	62.5%	56%	50%	80%
		Oct-12	57.5%	64%	60%	70%
		Nov-12	62.5%	44%	50%	45%
		Dec-12	72.5%	36%	60%	50%
		Jan-13	62.5%	48%	70%	70%

LAC+USC Medical Center
Operational Monitoring Report
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Indicator #7 – Med Surg / ICU / OB/GYN Metrics

7. Med Surg / ICU Bed Census and Occupancy (%) Medical Surgical Unit (Med Surg) Jail Unit (Jail) ICUs (Excluding Burn ICUs) OB/GYN Unit	Census: The total number admitted pediatric inpatients at 12:00 AM midnight of a designated pediatric ward. Occupancy: The total number of admitted inpatients divided by the total number of licensed beds on that unit and reported as percentage. Source of Data: Affinity	<table><tr><th>Date</th><th>Med Surg (309 beds)</th><th>Jail (24 Beds)</th><th>ICUs (120 Beds)</th><th>Burn* (20 Beds)</th><th>OB/GYN (32 beds)</th></tr><tr><td>Nov-12</td><td>87%</td><td>83%</td><td>83.5 %</td><td>51%</td><td>87%</td></tr><tr><td>Dec-12</td><td>88%</td><td>71%</td><td>83%</td><td>44%</td><td>83%</td></tr><tr><td>Jan-13</td><td>95%</td><td>73%</td><td>85%</td><td>55%</td><td>98%</td></tr></table> * Burn= Both ward (10) and ICUs (10)	Date	Med Surg (309 beds)	Jail (24 Beds)	ICUs (120 Beds)	Burn* (20 Beds)	OB/GYN (32 beds)	Nov-12	87%	83%	83.5 %	51%	87%	Dec-12	88%	71%	83%	44%	83%	Jan-13	95%	73%	85%	55%	98%
Date	Med Surg (309 beds)	Jail (24 Beds)	ICUs (120 Beds)	Burn* (20 Beds)	OB/GYN (32 beds)																					
Nov-12	87%	83%	83.5 %	51%	87%																					
Dec-12	88%	71%	83%	44%	83%																					
Jan-13	95%	73%	85%	55%	98%																					